

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type  
over the lines.

12FE4M5

IMPACT

ADDRESS (number and street)

192 Lexington Ave.

Suite 1001

☐ Check if different  
than previously  
reported. (ACC)

New York

NY

10016

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00348607

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☒ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ General (12G)☐ Runoff (12R)☐ Convention (12C)☐ Special (12S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y  
06 01 2014

through

M M M / D D D / Y Y Y Y Y Y  
06 30 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer David A. Barrett

Signature of Treasurer

David A. Barrett

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
07 18 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

**IMPACT**

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
06 / 01 / 2014 To: M M / D D / Y Y Y Y Y Y  
06 / 30 / 2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">2014</span>		<span style="border: 1px solid black; padding: 2px;">93757.37</span>
(b) Cash on Hand at Beginning of Reporting Period.....	<span style="border: 1px solid black; padding: 2px;">70155.30</span>	
(c) Total Receipts (from Line 19) .....	<span style="border: 1px solid black; padding: 2px;">70000.35</span>	<span style="border: 1px solid black; padding: 2px;">245753.21</span>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<span style="border: 1px solid black; padding: 2px;">140155.65</span>	<span style="border: 1px solid black; padding: 2px;">339510.58</span>
7. Total Disbursements (from Line 31) .....	<span style="border: 1px solid black; padding: 2px;">44026.62</span>	<span style="border: 1px solid black; padding: 2px;">243381.55</span>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<span style="border: 1px solid black; padding: 2px;">96129.03</span>	<span style="border: 1px solid black; padding: 2px;">96129.03</span>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	

☒ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

**IMPACT**

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	1		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	4

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	500.00	7500.00
(ii) Unitemized .....	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ►	500.00	7500.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	69500.00	238250.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	70000.00	245750.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.35	3.21
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	70000.35	245753.21
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	70000.35	245753.21

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	18026.62	136381.55
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	18026.62	136381.55
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	26000.00	106000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	1000.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	44026.62	243381.55
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	44026.62	243381.55

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	70000.00	245750.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	70000.00	245750.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	18026.62	136381.55
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	18026.62	136381.55

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**IMPACT**

Full Name (Last, First, Middle Initial)

**A. Sean Kennedy**

Mailing Address 5510 Broad Branch Road NW

City

Washington

State

DC

Zip Code

20015

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Airlines for America

Occupation

Vice President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
06 / 30 / 2014

Transaction ID : C9856909

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

500.00

500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 22

(check only one)

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NAME OF COMMITTEE (In Full)

**IMPACT**

Full Name (Last, First, Middle Initial)

## **A. American Dental Association PAC**

Mailing Address 1111 14th Street, NW  
Suite 1100

City State Zip Code  
Washington DC 20005

FEC ID number of contributing  
federal political committee.

**C** C00000729

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**06** / **19** / **2014**

**Transaction ID : C10097620**

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

## **B. Lockheed Martin Employees' PAC**

Mailing Address 2121 Crystal Drive  
Suite 100

City State Zip Code  
Arlington VA 22202

FEC ID number of contributing  
federal political committee.

**C** C00303024

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**06** / **27** / **2014**

**Transaction ID : C10098990**

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

## **C. American Association of Nurse Practitioners PAC**

Mailing Address PO Box 12846

City State Zip Code  
Austin TX 78711

FEC ID number of contributing  
federal political committee.

**C** C00358903

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**06** / **02** / **2014**

**Transaction ID : C9426671**

Amount of Each Receipt this Period

5000.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

15000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
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NAME OF COMMITTEE (In Full)

**IMPACT**

Full Name (Last, First, Middle Initial)

## **A. AFLAC PAC**

Mailing Address 1932 Wynnton Rd.

City State Zip Code  
Columbus GA 31999

FEC ID number of contributing  
federal political committee.

**C** C00034157

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**06** / **19** / **2014**

**Transaction ID : C10097621**

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

## **B. Humana Inc. PAC**

Mailing Address 1776 Eye St., NW  
Suite 890

City State Zip Code  
Washington DC 20006

FEC ID number of contributing  
federal political committee.

**C** C00271007

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

**06** / **27** / **2014**

**Transaction ID : C10098991**

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

## **C. McGraw Hill Financial Inc. PAC**

Mailing Address 1221 Avenue of the Americas

City State Zip Code  
New York NY 10020

FEC ID number of contributing  
federal political committee.

**C** C00494682

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

**06** / **30** / **2014**

**Transaction ID : C10117702**

Amount of Each Receipt this Period

2500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

10000.00

**TOTAL** This Period (last page this line number only)..... ►



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

**IMPACT**

Full Name (Last, First, Middle Initial)

## **A. Bank of America State & Federal PAC**

Mailing Address 1100 North King Street

City State Zip Code  
Wilmington DE 19884

FEC ID number of contributing  
federal political committee.

**C** C00043489

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**06** / **27** / **2014**

**Transaction ID : C10098992**

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

## **B. Association for Advanced Life Underwriting PAC**

Mailing Address 11921 Freedom Dr. Suite 1100

City State Zip Code  
Reston VA 20190

FEC ID number of contributing  
federal political committee.

**C** C00447565

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

**06** / **30** / **2014**

**Transaction ID : C10117703**

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

## **C. Office & Professional Employees Intl Union**

Mailing Address 80 Eighth Avenue  
Suite 610

City State Zip Code  
New York NY 10011

FEC ID number of contributing  
federal political committee.

**C** C00007898

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**06** / **11** / **2014**

**Transaction ID : C9851763**

Amount of Each Receipt this Period

5000.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

11500.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
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NAME OF COMMITTEE (In Full)

**IMPACT**

Full Name (Last, First, Middle Initial)

## **A. American College of Radiology Assoc. PAC**

Mailing Address 1891 Preston White Drive

City State Zip Code  
Reston VA 20191

FEC ID number of contributing  
federal political committee.

**C** C00343459

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 30 / 2014

**Transaction ID : C10117704**

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

## **B. National Cable & Telecommunications Assoc. PAC**

Mailing Address 25 Massachusetts Ave. NW Suite 100

City State Zip Code  
Washington DC 20001

FEC ID number of contributing  
federal political committee.

**C** C00010082

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 19 / 2014

**Transaction ID : C10097624**

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

## **C. Credit Suisse Securities (USA) LLC PAC**

Mailing Address 1201 F Street, NW Suite 450

City State Zip Code  
Washington DC 20004

FEC ID number of contributing  
federal political committee.

**C** C00111559

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y  
06 / 13 / 2014

**Transaction ID : C9851764**

Amount of Each Receipt this Period

5000.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

15000.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 11 OF 22  
(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

**IMPACT**

Full Name (Last, First, Middle Initial)

## **A. Comcast Corporation & NBC Universal PAC**

Mailing Address 1701 JFK Boulevard, 49th Floor

City State Zip Code  
Philadelphia PA 19103

FEC ID number of contributing  
federal political committee.

**C** C00248716

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**06** / **27** / **2014**

**Transaction ID : C10098994**

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

## **B. Laborer's International Union of North America PAC**

Mailing Address 905 16th St., N.W.

City State Zip Code  
Washington DC 20006

FEC ID number of contributing  
federal political committee.

**C** C00007922

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**06** / **27** / **2014**

**Transaction ID : C10098996**

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

## **C. American Express PAC**

Mailing Address 801 Pennsylvania Ave., NW  
Suite 650

City State Zip Code  
Washington DC 20004

FEC ID number of contributing  
federal political committee.

**C** C00040535

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

**06** / **27** / **2014**

**Transaction ID : C10098998**

Amount of Each Receipt this Period

5000.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

15000.00

**TOTAL** This Period (last page this line number only)..... ►

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 OF 22  
(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**IMPACT**

Full Name (Last, First, Middle Initial)

## **A. Airlines for America PAC**

Mailing Address 1301 Pennsylvania Avenue, NW  
Suite 1100

City State Zip Code  
Washington DC 20004

FEC ID number of contributing  
federal political committee.

**C** C00114694

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

**06** / **18** / **2014**

**Transaction ID : C10097619**

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

## **B. Intellectual Ventures NPM Inc. PAC**

Mailing Address 1100 H Street NW  
Suite 900

City State Zip Code  
Washington DC 20005

FEC ID number of contributing  
federal political committee.

**C** C00557165

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

**06** / **27** / **2014**

**Transaction ID : C10098999**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

## **C.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

/  /

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

3000.00

69500.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☐ 27   ☐ 28a   ☐ 28b   ☐ 28c   ☐ 29   ☐ 30b

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NAME OF COMMITTEE (In Full)

**IMPACT**

Full Name (Last, First, Middle Initial)

**A. Flanagan Fulkerson & Company**Mailing Address 220 I Street NE  
Suite 250

City Washington State DC Zip Code 20002

Purpose of Disbursement  
Consulting Services-Fundraising

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y  
06 / 01 / 2014**Transaction ID : D542330**

Amount of Each Disbursement this Period

5000.00

Not for Federal Candidate

Full Name (Last, First, Middle Initial)

**B. Paychex, Inc.**Mailing Address Smallbiz Payroll  
Eagle's Landing Business Park

City Rochester State NY Zip Code 14623

Purpose of Disbursement  
Payroll Fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y  
06 / 10 / 2014**Transaction ID : D542340**

Amount of Each Disbursement this Period

77.00

Full Name (Last, First, Middle Initial)

**C. Verdolino & Lowey, P.C.**Mailing Address 124 Washington St.  
Suite 101

City Foxboro State MA Zip Code 02035

Purpose of Disbursement  
Professional Services-Accounting

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y  
06 / 03 / 2014**Transaction ID : D542331**

Amount of Each Disbursement this Period

608.74

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5685.74

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

**IMPACT**

Full Name (Last, First, Middle Initial)

**A. Cres Inc.**

Mailing Address 192 Lexington Avenue #1205

City New York      State NY      Zip Code 10016-6823

Purpose of Disbursement  
Rent & Utilities

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
06 / 27 / 2014
**Transaction ID : D542451**

Amount of Each Disbursement this Period

1335.15

Full Name (Last, First, Middle Initial)

**B. Blue Cross Blue Shield**

Mailing Address PO Box 659806

City San Antonio      State TX      Zip Code 78265

Purpose of Disbursement  
Health Insurance

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
06 / 27 / 2014
**Transaction ID : D542452**

Amount of Each Disbursement this Period

279.32

Full Name (Last, First, Middle Initial)

**C. Zamir Computer Consulting**

Mailing Address 382 Central Park West, Suite 6A

City New York      State NY      Zip Code 10025

Purpose of Disbursement  
Computer Consulting

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
06 / 05 / 2014
**Transaction ID : D542332**

Amount of Each Disbursement this Period

66.00

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1680.47

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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NAME OF COMMITTEE (In Full)

**IMPACT**

Full Name (Last, First, Middle Initial)

**A. Perkins Coie**Mailing Address 1201 Third Ave.  
Suite 4800

City Seattle State WA Zip Code 98101

Purpose of Disbursement  
Professional Services-Legal

001

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y  
06 / 05 / 2014

Transaction ID : D542333

Amount of Each Disbursement this Period

88.00

Full Name (Last, First, Middle Initial)

**B. Express EMPS**

Mailing Address PO Box 6600

City Hagerstown State MD Zip Code 21740

Purpose of Disbursement  
Credit Card Processing Fee

001

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y  
06 / 05 / 2014

Transaction ID : D542334

Amount of Each Disbursement this Period

25.00

Full Name (Last, First, Middle Initial)

**C. City of New York**Mailing Address NYC Dept. of Finance  
66 John Street, 12th Floor

City New York State NY Zip Code 10038

Purpose of Disbursement  
Transportation

002

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y  
06 / 19 / 2014

Transaction ID : D542347

Amount of Each Disbursement this Period

350.49

SUBTOTAL of Disbursements This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

463.49





**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
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☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**IMPACT**

Full Name (Last, First, Middle Initial)

**A. UPS Store**

Mailing Address 105 East 34th Street

City New York      State NY      Zip Code 10016

Purpose of Disbursement  
Postage

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
06 / 09 / 2014
**Transaction ID : D542486**

Amount of Each Disbursement this Period

15.22

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. UPS Store**

Mailing Address 105 East 34th Street

City New York      State NY      Zip Code 10016

Purpose of Disbursement  
Postage

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
06 / 09 / 2014
**Transaction ID : D542487**

Amount of Each Disbursement this Period

15.22

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C. UPS Store**

Mailing Address 105 East 34th Street

City New York      State NY      Zip Code 10016

Purpose of Disbursement  
Postage

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
06 / 09 / 2014
**Transaction ID : D542488**

Amount of Each Disbursement this Period

30.30

**[MEMO ITEM]****SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00





**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
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☐ 27   ☐ 28a   ☐ 28b   ☐ 28c   ☐ 29   ☐ 30b

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NAME OF COMMITTEE (In Full)

**IMPACT**

Full Name (Last, First, Middle Initial)

**A. Samuel E. Bart**

Mailing Address 1623 3rd Avenue #14AW

City State Zip Code  
New York NY 10128Purpose of Disbursement  
Payroll

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 30 2014**Transaction ID : D542461**

Amount of Each Disbursement this Period

855.28

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**B. Nicholas Kutryb**Mailing Address 455 W 37th Street  
Apt 510City State Zip Code  
New York NY 10018Purpose of Disbursement  
Payroll

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
06 30 2014**Transaction ID : D542463**

Amount of Each Disbursement this Period

1661.66

**[MEMO ITEM]**

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00

18026.62

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
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<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**IMPACT**

Full Name (Last, First, Middle Initial)

**A. Big Easy Committee**Mailing Address 700 13th Street, NW  
Suite 600

City Washington State DC Zip Code 20005

Purpose of Disbursement  
2014 Contribution

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☐ General  
☒ Other (specify) ▼

State: District: 2014 Contribution

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	24	/	2014

**Transaction ID : D542440**

Amount of Each Disbursement this Period

5000.00
---------

Full Name (Last, First, Middle Initial)

**B. Graham for Congress**

Mailing Address PO Box 310

City Tallahassee State FL Zip Code 32302-0310

Purpose of Disbursement  
Contribution

Candidate Name

**Gwen Graham**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: FL District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	23	/	2014

**Transaction ID : D542421**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. Congressional Black Caucus PAC**

Mailing Address PO Box 70980

City Washington State DC Zip Code 20024

Purpose of Disbursement  
2014 Contribution

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☐ Primary ☐ General  
☒ Other (specify) ▼

State: District: 2014 Contribution

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	24	/	2014

**Transaction ID : D542433**

Amount of Each Disbursement this Period

5000.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

11000.00
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**IMPACT**

Full Name (Last, First, Middle Initial)

**A. Montana Democratic Party**

Mailing Address PO Box 802

City	State	Zip Code
Helena	MT	59624

Purpose of Disbursement  
2014 Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

2014 Contribution

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		25		2014

**Transaction ID : D542444**

Amount of Each Disbursement this Period

5000.00
---------

Full Name (Last, First, Middle Initial)

**B. Nunn Victory Fund**

Mailing Address PO Box 78936

City	State	Zip Code
Atlanta	GA	30357

Purpose of Disbursement  
2014 Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

2014 Contribution

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		24		2014

**Transaction ID : D542426**

Amount of Each Disbursement this Period

5000.00
---------

Full Name (Last, First, Middle Initial)

**C. Kathleen Rice for Congress**Mailing Address 410 Jericho Turnpike  
Suite 200

City	State	Zip Code
Jericho	NY	11753

Purpose of Disbursement  
Contribution

Candidate Name

**Kathleen Rice**

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: NY District: 04

Disbursement For: 2014

<input type="checkbox"/> Primary	<input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		25		2014

**Transaction ID : D542449**

Amount of Each Disbursement this Period

5000.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

15000.00
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26000.00
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